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## \*BIBDATASHEET\*

CONFIRMATION NO. 8734

Bib Data Sheet

|  |   |                                    |   |  |
|--|---|------------------------------------|---|--|
| <b>SERIAL NUMBER</b><br>10/773,302   | <b>FILING OR 371(c) DATE</b><br>02/09/2004<br><b>RULE</b>   | <b>CLASS</b><br>435                | <b>GROUP ART UNIT</b><br>1634   | <b>ATTORNEY DOCKET NO.</b><br>0652.1670002/JUK/JCI |
| <b>APPLICANTS</b><br>Thomas Jenuwein, Vienna, AUSTRIA;<br>Gotz Laible, Hamilton, NEW ZEALAND;<br>Donal O'Carroll, Greystones, IRELAND;<br>Frank Eisenhaber, Vienna, AUSTRIA;<br>Stephen Rea, Vienna, AUSTRIA;  |   |                                    |   |  |
| <b>** CONTINUING DATA *****</b><br>This application is a DIV of 09/589,892 06/09/2000 PAT 6,689,583<br>and is a CIP of 08/945,988 11/10/1997 ABN<br>which is a 371 of PCT/EP96/01818 05/02/1996  |   |                                    |   |  |
| <b>** FOREIGN APPLICATIONS *****</b><br>GERMANY 195 16 776.7 05/10/1995  |   |                                    |   |  |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 03/24/2004</b>   |   |                                    |   |  |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u> |   | <b>STATE OR COUNTRY</b><br>AUSTRIA | <b>SHEETS DRAWING</b><br>16   | <b>TOTAL CLAIMS</b><br>26                          |
|  |   |                                    |   | <b>INDEPENDENT CLAIMS</b><br>2                     |
| <b>ADDRESS</b><br>26111  |   |                                    |   |  |
| <b>TITLE</b><br>CHROMATIN REGULATOR GENES  |   |                                    |   |  |
| <b>FILING FEE RECEIVED</b><br>1308   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                    | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |